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MEAL TAX MONTHLY COLLECTION AND REMITTANCE		
<input type="checkbox"/> JANUARY	<input type="checkbox"/> MAY	<input type="checkbox"/> SEPTEMBER
<input type="checkbox"/> FEBRUARY	<input type="checkbox"/> JUNE	<input type="checkbox"/> OCTOBER
<input type="checkbox"/> MARCH	<input type="checkbox"/> JULY	<input type="checkbox"/> NOVEMBER
<input type="checkbox"/> APRIL	<input type="checkbox"/> AUGUST	<input type="checkbox"/> DECEMBER
Total Meal Receipts	\$	
Less Non-Taxable Receipts *Attach explanation for Non-Receipts	\$	
Receipts Subject To Meals Tax	\$	
Meals Tax (2.5% of Receipts)	\$	
Less 6% For Tax Collection Fee *(On-Time Remittance Fee)	\$	
<b>TOTAL DUE BY THE 20<sup>TH</sup> OF THE MONTH</b>	\$	
10% Penalty (after the 20 <sup>th</sup> of the month)	\$	
10% Interest (after the 30 <sup>th</sup> of the month)	\$	
<b>TOTAL</b>	\$	

This report and payment is due on or before the **Twentieth** day of the month following the Month during which the tax was collected. Checks should be made payable to the Town of Herndon. Payment received after the **Twentieth** day of the month shall incur a penalty of 10% of the tax due or ten dollars, whichever is greater. In addition to the penalty, interest of 10% per annum shall be assessed on all delinquent meal tax payments. Please remit all payments to **P.O. Box 427, Herndon, Virginia 20172-0427**. If you require additional assistance, please call (703) 435-6800 ext.2036.

Sign \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Phone Number \_\_\_\_\_